

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

BURGER KING Franchisee PAC

ADDRESS (number and street) ▼

1701 Barrett Lakes Blvd. NW

Suite 180

☐ Check if different than previously reported. (ACC)

Kennesaw

GA

30144

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00329425

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☐ July 15
Quarterly Report (Q2)☐ October 15
Quarterly Report (Q3)☐ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☒ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ General (12G)☐ Runoff (12R)☐ Convention (12C)☐ Special (12S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Keith Egyed

Signature of Treasurer

Keith Egyed

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

BURGER KING Franchisee PAC

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y
06		01		2015

To:

M M	/	D D	/	Y Y Y Y Y
06		30		2015

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <div><div>Y Y Y Y Y</div><div>2015</div></div>		<div><div></div><div>16105.08</div></div>
(b) Cash on Hand at Beginning of Reporting Period.....	<div><div></div><div>95156.53</div></div>	
(c) Total Receipts (from Line 19)	<div><div></div><div>38409.97</div></div>	<div><div></div><div>143619.44</div></div>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<div><div></div><div>133566.50</div></div>	<div><div></div><div>159724.52</div></div>
7. Total Disbursements (from Line 31).....	<div><div></div><div>11165.86</div></div>	<div><div></div><div>37323.88</div></div>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<div><div></div><div>122400.64</div></div>	<div><div></div><div>122400.64</div></div>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<div><div></div><div>0.00</div></div>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<div><div></div><div>0.00</div></div>	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

BURGER KING Franchisee PAC

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	1		2	0	1	5

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	5

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	37350.00	139805.00
(ii) Unitemized	1058.00	3808.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ►	38408.00	143613.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	38408.00	143613.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	1.97	6.44
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	38409.97	143619.44
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	38409.97	143619.44

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	665.86	2323.88
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	665.86	2323.88
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	10500.00	35000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	11165.86	37323.88
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	11165.86	37323.88

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	38408.00	143613.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	38408.00	143613.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	665.86	2323.88
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	665.86	2323.88

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 6 OF 31

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

BURGER KING Franchisee PAC

Full Name (Last, First, Middle Initial)

A. Michael Olander

Mailing Address 10761 Trego Trl

City

Raleigh

State

NC

Zip Code

27614-9660

FEC ID number of contributing
federal political committee.

C

Name of Employer

KIN Restaurant LLC

Occupation

Franchisee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	2		2	0	1	5

Transaction ID : 9317666

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Jay E. Amarosa

Mailing Address 477 Ocean Avenue N

City

Long Branch

State

NJ

Zip Code

07740

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Restaurant Group

Occupation

Franchisee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	9		2	0	1	5

Transaction ID : 9317669

Amount of Each Receipt this Period

625.00

Full Name (Last, First, Middle Initial)

C. David Harper

Mailing Address 1185 W 3050 S

City

Ogden

State

UT

Zip Code

84401

FEC ID number of contributing
federal political committee.

C

Name of Employer

Meridian Restaurants

Occupation

Franchisee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	9		2	0	1	5

Transaction ID : 9317670

Amount of Each Receipt this Period

625.00

SUBTOTAL of Receipts This Page (optional)..... ►

2250.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 31
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

BURGER KING Franchisee PAC

Full Name (Last, First, Middle Initial)

A. Colleen Meyers

Mailing Address 24 Turnberry Cir

City State Zip Code
 Greenwood IN 46143-1938

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Southport Resaurants Inc.

Occupation
 Franchisee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 / 10 / 2015

Transaction ID : 9317673

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Raymond A. Conn

Mailing Address 2040 N Ocoee St

City State Zip Code
 Cleveland TN 37311-3917

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Restaurant Assoc Cincinnati

Occupation
 Franchisee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 / 11 / 2015

Transaction ID : 9317675

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Camilla Warren

Mailing Address 4450 Black Oak Ln

City State Zip Code
 Mason OH 45040-8437

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Restaurant Assoc of Cincinnati

Occupation
 Franchisee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 / 11 / 2015

Transaction ID : 9317676

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2500.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 31
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

BURGER KING Franchisee PAC

Full Name (Last, First, Middle Initial)

A. Matthew Wassen

Mailing Address 178 Lexington Drive

City State Zip Code
 Loveland OH 45140

FEC ID number of contributing
federal political committee.

C

Name of Employer

RAC Inc.

Occupation

Franchisee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 / 11 / 2015

Transaction ID : 9317677

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Patrick Sidhu

Mailing Address 9718 Faversham Ct

City State Zip Code
 Pike Road AL 36064

FEC ID number of contributing
federal political committee.

C

Name of Employer

Premier Kings Inc.

Occupation

Franchisee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 / 17 / 2015

Transaction ID : 9317681

Amount of Each Receipt this Period

1250.00

Full Name (Last, First, Middle Initial)

C. Daniel Tapia

Mailing Address 4380 SW 458 St

City State Zip Code
 Miami FL 33157

FEC ID number of contributing
federal political committee.

C

Name of Employer

Gold Co LLC

Occupation

Franchisee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 / 17 / 2015

Transaction ID : 9317682

Amount of Each Receipt this Period

360.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1860.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

BURGER KING Franchisee PAC

Full Name (Last, First, Middle Initial)

A. Dennis E. Erickson

Mailing Address 7401 S. 95th Court

City
Lincoln

State
NE

Zip Code
68526

FEC ID number of contributing
federal political committee.

C

Name of Employer

Horizon Holding Inc.

Occupation

Franchisee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4000.00

Date of Receipt

06 / 17 / 2015

Transaction ID : 9317683

Amount of Each Receipt this Period

3000.00

Full Name (Last, First, Middle Initial)

B. Steven Lewis

Mailing Address PO Box 528
818 Evans Road

City

Gwynedd Vly

State

PA

Zip Code

19437-0528

FEC ID number of contributing
federal political committee.

C

Name of Employer

US Restaurants

Occupation

Franchisee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

06 / 18 / 2015

Transaction ID : 9317687

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

C. Andy Myers

Mailing Address 102 State Street

City

Nicholson

State

PA

Zip Code

18446

FEC ID number of contributing
federal political committee.

C

Name of Employer

National Franchisee Association

Occupation

Franchisee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

06 / 18 / 2015

Transaction ID : 9317688

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

8250.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 31

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

BURGER KING Franchisee PAC

Full Name (Last, First, Middle Initial)

A. Glenn Levins

Mailing Address 5967 Vintage Oaks Circle

City State Zip Code
 West Delray Beach FL 33484-6427

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Phoenix Organization

Occupation
 Franchise Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

MM / DD / YYYY
 06 / 18 / 2015

Transaction ID : 9317689

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Glenn Levins

Mailing Address 5967 Vintage Oaks Circle

City State Zip Code
 West Delray Beach FL 33484-6427

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Phoenix Organization

Occupation
 Franchise Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3500.00

Date of Receipt

MM / DD / YYYY
 06 / 18 / 2015

Transaction ID : 9317691

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Peter J. Cotter

Mailing Address 5009 Harbour Towne Dr.

City State Zip Code
 Raleigh NC 27604

FEC ID number of contributing
federal political committee.

C

Name of Employer
 KIN Restaurants LLC

Occupation
 Franchise Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

MM / DD / YYYY
 06 / 18 / 2015

Transaction ID : 9317692

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

3700.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

BURGER KING Franchisee PAC

Full Name (Last, First, Middle Initial)

A. Roopali Jethwa

Mailing Address 194 Eileen Drive

City State Zip Code
 Cedar Grove NJ 07009

FEC ID number of contributing
federal political committee.

C

Name of Employer

Burger King

Occupation

Franchisee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 / 18 / 2015

Transaction ID : 9317699

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Roopali Jethwa

Mailing Address 194 Eileen Drive

City State Zip Code
 Cedar Grove NJ 07009

FEC ID number of contributing
federal political committee.

C

Name of Employer

Burger King

Occupation

Franchisee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 / 18 / 2015

Transaction ID : 9317700

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. Rochelle Krispin

Mailing Address 18034 W. Denton

City State Zip Code
 Litchfield Park AZ 85340

FEC ID number of contributing
federal political committee.

C

Name of Employer

Barnett Management Company

Occupation

Franchisee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1080.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 / 18 / 2015

Transaction ID : 9317701

Amount of Each Receipt this Period

80.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

280.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 OF 31
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

BURGER KING Franchisee PAC

Full Name (Last, First, Middle Initial)

A. Rochelle Krispin

Mailing Address 18034 W. Denton

City State Zip Code
Litchfield Park AZ 85340

FEC ID number of contributing
federal political committee.

C

Name of Employer

Barnett Management Company

Occupation

Franchisee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1330.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 18 / 2015

Transaction ID : 9317702

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Dale Ma

Mailing Address 10720 1/2 Riverside Drive

City State Zip Code
N. Hollywood CA 91602

FEC ID number of contributing
federal political committee.

C

Name of Employer

National Franchisee Associatio

Occupation

Franchise Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

370.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 18 / 2015

Transaction ID : 9317703

Amount of Each Receipt this Period

370.00

Full Name (Last, First, Middle Initial)

C. Eric Oppenheim

Mailing Address 1017 Curtis Pl.

City State Zip Code
Rockville MD 20852

FEC ID number of contributing
federal political committee.

C

Name of Employer

Republic Foods Inc.

Occupation

Franchisee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

925.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 18 / 2015

Transaction ID : 9317704

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)..... ►

820.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

BURGER KING Franchisee PAC

Full Name (Last, First, Middle Initial)

A. Matthew Warren

Mailing Address 178 Lexington Drive

City State Zip Code
 Loevland OH 45140

FEC ID number of contributing
federal political committee.

C

Name of Employer

RAC Inc.

Occupation

Franchisee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 / 18 / 2015

Transaction ID : 9317705

Amount of Each Receipt this Period

1550.00

Full Name (Last, First, Middle Initial)

B. Joseph Anghelone

Mailing Address 118 Meirs Rd.

City State Zip Code
 Cream Ridge NJ 08514

FEC ID number of contributing
federal political committee.

C

Name of Employer

GeorgeTowe Group LP

Occupation

Franchisee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 / 18 / 2015

Transaction ID : 9317706

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. Joseph Anghelone

Mailing Address 118 Meirs Rd.

City State Zip Code
 Cream Ridge NJ 08514

FEC ID number of contributing
federal political committee.

C

Name of Employer

GeorgeTowe Group LP

Occupation

Franchisee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

725.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 / 18 / 2015

Transaction ID : 9317707

Amount of Each Receipt this Period

625.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2275.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 14 OF 31

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

BURGER KING Franchisee PAC

Full Name (Last, First, Middle Initial)

A. Michael Callahan, Jr.

Mailing Address 3000 Hamilton Blvd.

City

Wichita Falls

State

TX

Zip Code

76308

FEC ID number of contributing
federal political committee.

C

Name of Employer

Macres, Inc.

Occupation

Franchise Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

06 / 18 / 2015

Transaction ID : 9317708

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

B. Joseph E. Clements Jr.

Mailing Address 3003 Old Forge Drive

City

Baton Rouge

State

LA

Zip Code

70898

FEC ID number of contributing
federal political committee.

C

Name of Employer

Clements Management, LLC

Occupation

Franchisee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1340.00

Date of Receipt

06 / 18 / 2015

Transaction ID : 9317709

Amount of Each Receipt this Period

90.00

Full Name (Last, First, Middle Initial)

C. Peter J. Cotter

Mailing Address 5009 Harbour Towne Dr.

City

Raleigh

State

NC

Zip Code

27604

FEC ID number of contributing
federal political committee.

C

Name of Employer

KIN Restaurants LLC

Occupation

Franchise Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

06 / 18 / 2015

Transaction ID : 9317710

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

390.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 15 OF 31

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

BURGER KING Franchisee PAC

Full Name (Last, First, Middle Initial)

A. Kathie Degen

Mailing Address 1733 S Ingalls Street

City	State	Zip Code
Grand Island	NE	68803

FEC ID number of contributing
federal political committee.

C

Name of Employer
Degen Properties IncOccupation
Franchisee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

505.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06	/	18	/	2015

Transaction ID : 9317711

Amount of Each Receipt this Period

505.00

Full Name (Last, First, Middle Initial)

B. Dennis E. Erickson

Mailing Address 7401 S. 95th Court

City	State	Zip Code
Lincoln	NE	68526

FEC ID number of contributing
federal political committee.

C

Name of Employer
Horizon Holding Inc.Occupation
Franchisee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4200.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06	/	18	/	2015

Transaction ID : 9317712

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

C. Dennis E. Erickson

Mailing Address 7401 S. 95th Court

City	State	Zip Code
Lincoln	NE	68526

FEC ID number of contributing
federal political committee.

C

Name of Employer
Horizon Holding Inc.Occupation
Franchisee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4235.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06	/	18	/	2015

Transaction ID : 9317713

Amount of Each Receipt this Period

35.00

SUBTOTAL of Receipts This Page (optional)..... ►

740.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 OF 31
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

BURGER KING Franchisee PAC

Full Name (Last, First, Middle Initial)

A. Gary W. Robison

Mailing Address 6827 Raspberry Run

City State Zip Code
 Littleton CO 80125

FEC ID number of contributing
federal political committee.

C

Name of Employer

Rob-Kraft, Inc.

Occupation

Franchisee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 / 19 / 2015

Transaction ID : 9317732

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Tom Roose

Mailing Address 825 Hattons Ford Road

City State Zip Code
 Townville SC 29626

FEC ID number of contributing
federal political committee.

C

Name of Employer

Westwind Inc.

Occupation

Franchisee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 / 19 / 2015

Transaction ID : 9317733

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

C. Camilla Warren

Mailing Address 4450 Black Oak Ln

City State Zip Code
 Mason OH 45040-8437

FEC ID number of contributing
federal political committee.

C

Name of Employer

Restaurant Assoc of Cincinnati

Occupation

Franchisee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1125.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 / 19 / 2015

Transaction ID : 9317734

Amount of Each Receipt this Period

125.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

250.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 17 OF 31
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

BURGER KING Franchisee PAC

Full Name (Last, First, Middle Initial)

A. David Ostrowe

Mailing Address 1000 W. Wilshire #203

City	State	Zip Code
Oklahoma City	OK	73116

FEC ID number of contributing
federal political committee.

C

Name of Employer

O & M Restaurant Group

Occupation

Franchisee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		19		2015

Transaction ID : 9317735

Amount of Each Receipt this Period

35.00

Full Name (Last, First, Middle Initial)

B. Kathie Degen

Mailing Address 1733 S Ingalls Street

City	State	Zip Code
Grand Island	NE	68803

FEC ID number of contributing
federal political committee.

C

Name of Employer

Degen Properties Inc

Occupation

Franchisee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

605.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		19		2015

Transaction ID : 9317736

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. David Sutz

Mailing Address PO Box 383

City	State	Zip Code
Central Valley	NY	10917

FEC ID number of contributing
federal political committee.

C

Name of Employer

CanDu Management

Occupation

Franchisee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		19		2015

Transaction ID : 9317737

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ►

235.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 OF 31
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

BURGER KING Franchisee PAC

Full Name (Last, First, Middle Initial)

A. Brian Robison

Mailing Address 1717 W 38th Avenue

City State Zip Code
 Denver CO 80211

FEC ID number of contributing
federal political committee.

C

Name of Employer

Rob-Kraft Inc.

Occupation

Franchisee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

06 / 22 / 2015

Transaction ID : 9317777

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Tom Roose

Mailing Address 825 Hattons Ford Road

City State Zip Code
 Townville SC 29626

FEC ID number of contributing
federal political committee.

C

Name of Employer

Westwind Inc.

Occupation

Franchisee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

725.00

Date of Receipt

06 / 22 / 2015

Transaction ID : 9317778

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

C. David Sutz

Mailing Address PO Box 383

City State Zip Code
 Central Valley NY 10917

FEC ID number of contributing
federal political committee.

C

Name of Employer

CanDu Management

Occupation

Franchisee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

06 / 22 / 2015

Transaction ID : 9317779

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

500.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

BURGER KING Franchisee PAC

Full Name (Last, First, Middle Initial)

A. Jim Walther

Mailing Address 34 Broadview Ave.

City State Zip Code
 Warrenton VA 20186

FEC ID number of contributing
federal political committee.

C

Name of Employer

Waltco Foods, Inc.

Occupation

Franchise Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

MM / DD / YYYY
 06 / 22 / 2015

Transaction ID : 9317780

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Gary Andrzejewski

Mailing Address 1 Wendslow Place

City State Zip Code
 Lutherville Timonium MD 21093

FEC ID number of contributing
federal political committee.

C

Name of Employer

PJ Foods, LLC

Occupation

Franchisee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

MM / DD / YYYY
 06 / 22 / 2015

Transaction ID : 9317781

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. Daniel Tapia

Mailing Address 4380 SW 458 St

City State Zip Code
 Miami FL 33157

FEC ID number of contributing
federal political committee.

C

Name of Employer

Gold Co LLC

Occupation

Franchisee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

560.00

Date of Receipt

MM / DD / YYYY
 06 / 22 / 2015

Transaction ID : 9317783

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

400.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

BURGER KING Franchisee PAC

Full Name (Last, First, Middle Initial)

A. William Matthew Carpenter

Mailing Address 517 Lake Shore Drive, N

City

Barrington

State

IL

Zip Code

60010

FEC ID number of contributing
federal political committee.

C

Name of Employer

Toms King LLC

Occupation

Franchisee

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

06 / 22 / 2015

Transaction ID : 9317784

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Thomas Cardarelli

Mailing Address 253 D Heritage Hills

City

Somers

State

NY

Zip Code

10589

FEC ID number of contributing
federal political committee.

C

Name of Employer

Mt. Kisco Rest. Corp.

Occupation

Franchise Owner

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

06 / 22 / 2015

Transaction ID : 9317785

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

c. Joseph E. Clements Jr.

Mailing Address 3003 Old Forge Drive

City

Baton Rouge

State

LA

Zip Code

70898

FEC ID number of contributing
federal political committee.

C

Name of Employer

Clements Management, LLC

Occupation

Franchisee

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

2590.00

Date of Receipt

06 / 22 / 2015

Transaction ID : 9317787

Amount of Each Receipt this Period

1250.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1750.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 21 OF 31

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

BURGER KING Franchisee PAC

Full Name (Last, First, Middle Initial)

A. James Froio

Mailing Address 142 Shaw Farm Road

City	State	Zip Code
Canyon	MA	02021

FEC ID number of contributing
federal political committee.

C

Name of Employer

Froio Management Group, Inc.

Occupation

Franchisee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2600.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06	/	22	/	2015

Transaction ID : 9317788

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Steve Keith

Mailing Address 2757 Turtle Head Peak

City	State	Zip Code
Las Vegas	NV	89135

FEC ID number of contributing
federal political committee.

C

Name of Employer

Glencoe Management

Occupation

Franchisee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06	/	22	/	2015

Transaction ID : 9317790

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. Mitchell C. Laird

Mailing Address 11219 E Paradise Lane

City	State	Zip Code
Scottsdale	AZ	85255-1806

FEC ID number of contributing
federal political committee.

C

Name of Employer

MCL Enterprises, Inc.

Occupation

Franchisee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1950.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06	/	22	/	2015

Transaction ID : 9317791

Amount of Each Receipt this Period

450.00

SUBTOTAL of Receipts This Page (optional)..... ►

650.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 22 OF 31
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

BURGER KING Franchisee PAC

Full Name (Last, First, Middle Initial)

A. Michael C. DiSeveria

Mailing Address 16200 Bellingham Drive

City	State	Zip Code
Germantown	MD	20874

FEC ID number of contributing
federal political committee.

C

Name of Employer

Potomac Foods Company

Occupation

Franchisee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		22		2015

Transaction ID : 9317810

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

B. Gavin, P. O'Neill

Mailing Address 1673 Amberwood Way

City	State	Zip Code
Maineville	OH	45039-6822

FEC ID number of contributing
federal political committee.

C

Name of Employer

Restaurant Associates of Cincinnati, I

Occupation

Franchisee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		22		2015

Transaction ID : 9317811

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. Michael C. DiSeveria

Mailing Address 16200 Bellingham Drive

City	State	Zip Code
Germantown	MD	20874

FEC ID number of contributing
federal political committee.

C

Name of Employer

Potomac Foods Company

Occupation

Franchisee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		22		2015

Transaction ID : 9317814

Amount of Each Receipt this Period

5000.00

Contribution Over limit to be Refunded on next report

SUBTOTAL of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

10100.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 23 OF 31
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

BURGER KING Franchisee PAC

Full Name (Last, First, Middle Initial)

A. Amir Allison

Mailing Address 1648 Greenstone Trail

City	State	Zip Code
Fort Collins	CO	80525

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allison Investments LLC

Occupation

Franchisee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
06	/	23	/	2015

Transaction ID : 9318495

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

B. Glenn Levins

Mailing Address 5967 Vintage Oaks Circle

City	State	Zip Code
West Delray Beach	FL	33484-6427

FEC ID number of contributing
federal political committee.

C

Name of Employer

Phoenix Organization

Occupation

Franchise Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3600.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
06	/	23	/	2015

Transaction ID : 9318496

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. Thomas McDonald

Mailing Address 3 Sable Ridge Ct.

City	State	Zip Code
Las Vegas	NV	89135

FEC ID number of contributing
federal political committee.

C

Name of Employer

Glencoe Management, Inc.

Occupation

Franchisee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
06	/	24	/	2015

Transaction ID : 9318499

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ►

400.00

TOTAL This Period (last page this line number only)..... ►

37350.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

BURGER KING Franchisee PAC

Full Name (Last, First, Middle Initial)

A. SunTrust Bank

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			0	1			2	0	1	5		

Mailing Address 1184 Ernest W Barrett Pkwy NW

City	State	Zip Code
Kennesaw	GA	30144-4534

Transaction ID : 9317662Purpose of Disbursement
Bank Service Charge

001

Amount of Each Disbursement this Period

Candidate Name

612.86

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Bank Service Charge

Full Name (Last, First, Middle Initial)

B. SunTrust Bank

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			1	8			2	0	1	5		

Mailing Address 1184 Ernest W Barrett Pkwy NW

City	State	Zip Code
Kennesaw	GA	30144-4534

Transaction ID : 9317663Purpose of Disbursement
Analysis Fee

001

Amount of Each Disbursement this Period

Candidate Name

15.00

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Analysis Fee

Full Name (Last, First, Middle Initial)

C. SunTrust Bank

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			2	9			2	0	1	5		

Mailing Address 1184 Ernest W Barrett Pkwy NW

City	State	Zip Code
Kennesaw	GA	30144-4534

Transaction ID : 9317664Purpose of Disbursement
Stop Payment Fee

001

Amount of Each Disbursement this Period

Candidate Name

38.00

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Stop Payment Fee

SUBTOTAL of Disbursements This Page (optional)..... ►

665.86

TOTAL This Period (last page this line number only)..... ►

665.86

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

BURGER KING Franchisee PAC

Full Name (Last, First, Middle Initial)

A. Cole for Congress

Mailing Address P.O. Box 722256

City	State	Zip Code
Norman	OK	73070

Purpose of Disbursement
Direct Contribution

011

Candidate Name

Tom ColeCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

State: OK District: 04

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		03		2015

Transaction ID : 9238368

Amount of Each Disbursement this Period

500.00

Direct Contribution

Full Name (Last, First, Middle Initial)

B. Andy Harris for Congress

Mailing Address P.O. Box 1527

City	State	Zip Code
Annapolis	MD	21404-1527

Purpose of Disbursement
Direct Contribution

011

Candidate Name

Andy HarrisCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

State: MD District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		03		2015

Transaction ID : 9238369

Amount of Each Disbursement this Period

1000.00

Direct Contribution

Full Name (Last, First, Middle Initial)

C. Issa for Congress

Mailing Address P.O. Box 760

City	State	Zip Code
Vista	CA	92085

Purpose of Disbursement
Direct Contribution

011

Candidate Name

Darrell IssaCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 49

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		03		2015

Transaction ID : 9238370

Amount of Each Disbursement this Period

500.00

Direct Contribution

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

BURGER KING Franchisee PAC

Full Name (Last, First, Middle Initial)

A. Tom Macarthur For Congress

Mailing Address PO Box 225

City	State	Zip Code
Colonia	NJ	07067

Purpose of Disbursement
Direct Contribution

011

Candidate Name

Rep. Tom MacArthurCategory/
Type

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President
State:	District:
NJ	03

Disbursement For:	2016
	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		03		2015

Transaction ID : 9238371

Amount of Each Disbursement this Period

500.00

Direct Contribution

Full Name (Last, First, Middle Initial)

B. VoteTipton.com

Mailing Address PO Box 1582

City	State	Zip Code
Cortez	CO	81321

Purpose of Disbursement
Direct Contribution

011

Candidate Name

Rep. Scott TiptonCategory/
Type

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President
State:	District:
CO	03

Disbursement For:	2016
	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		03		2015

Transaction ID : 9238373

Amount of Each Disbursement this Period

500.00

Direct Contribution

Full Name (Last, First, Middle Initial)

C. Trott For Congress, Inc.Mailing Address 2085 E. West Maple Road
A-101

City	State	Zip Code
Commerce	MI	48390

Purpose of Disbursement
Direct Contribution

011

Candidate Name

David TrottCategory/
Type

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President
State:	District:
MI	11

Disbursement For:	2016
	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		03		2015

Transaction ID : 9238374

Amount of Each Disbursement this Period

500.00

Direct Contribution

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1500.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

BURGER KING Franchisee PAC

Full Name (Last, First, Middle Initial)

A. Walberg for Congress

Mailing Address 6769 Teachout Road

City	State	Zip Code
Tipton	MI	49287

Purpose of Disbursement
Direct Contribution

011

Candidate Name

Tim WalbergCategory/
Type

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President
State: MI	District: 07

Disbursement For: 2016
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		03		2015

Transaction ID : 9238375

Amount of Each Disbursement this Period

500.00

Direct Contribution

Full Name (Last, First, Middle Initial)

B. Collins for Senate

Mailing Address 11 Baxter Blvd

City	State	Zip Code
Portland	ME	04104-1095

Purpose of Disbursement
Direct Contribution

011

Candidate Name

Susan CollinsCategory/
Type

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President
State: ME	District:

Disbursement For: 2020
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		04		2015

Transaction ID : 9238376

Amount of Each Disbursement this Period

2000.00

Direct Contribution

Full Name (Last, First, Middle Initial)

C. Valadao For Congress

Mailing Address 504 Van Ness

City	State	Zip Code
Fresno	CA	93721

Purpose of Disbursement
Direct Contribution

011

Candidate Name

Rep. David ValadaoCategory/
Type

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President
State: CA	District: 21

Disbursement For: 2016
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		04		2015

Transaction ID : 9238378

Amount of Each Disbursement this Period

500.00

Direct Contribution

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

3000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

BURGER KING Franchisee PAC

Full Name (Last, First, Middle Initial)

A. Friends Of Jason Chaffetz

Mailing Address 315 Westfield Circle

City Alpine	State UT	Zip Code 84004
----------------	-------------	-------------------

Purpose of Disbursement
Direct Contribution

011

Candidate Name

Rep. Jason ChaffetzCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

State: UT District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		05		2015

Transaction ID : 9238379

Amount of Each Disbursement this Period

1000.00

Direct Contribution

Full Name (Last, First, Middle Initial)

B. George Holding for Congress

Mailing Address PO Box 97187

City Raleigh	State NC	Zip Code 27624
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Purpose of Disbursement
Direct Contribution

011

Candidate Name

Mr. George HoldingCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

State: NC District: 13

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		11		2015

Transaction ID : 9267185

Amount of Each Disbursement this Period

500.00

Direct Contribution

Full Name (Last, First, Middle Initial)

C. Mario Diaz-Balart for Congress

Mailing Address 8770 SW 72nd St # 422

City Miami	State FL	Zip Code 33173-3512
---------------	-------------	------------------------

Purpose of Disbursement
Direct Contribution

011

Candidate Name

Mario Diaz-BalartCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

State: FL District: 21

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		11		2015

Transaction ID : 9267188

Amount of Each Disbursement this Period

1000.00

Direct Contribution

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

2500.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

BURGER KING Franchisee PAC

Full Name (Last, First, Middle Initial)

A. Steve Chabot for Congress

Mailing Address 3030 Harrison Ave

City	State	Zip Code
Cincinnati	OH	45211-5758

Purpose of Disbursement
Direct Contribution

Candidate Name

Steve Chabot

Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State: OH	District: 01

Disbursement For: 2016
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		10		2015

Transaction ID : 9267190

Amount of Each Disbursement this Period

500.00

Direct Contribution

Full Name (Last, First, Middle Initial)

B. Garret Graves For Congress

Mailing Address PO Box 64845

City	State	Zip Code
Baton Rouge	LA	70896

Purpose of Disbursement
Direct Contribution

Candidate Name

Garret Graves

Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State: LA	District: 06

Disbursement For: 2016
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		10		2015

Transaction ID : 9267191

Amount of Each Disbursement this Period

500.00

Direct Contribution

Full Name (Last, First, Middle Initial)

C. Royce Campaign Committee

Mailing Address PO Box 3249

City	State	Zip Code
Fullerton	CA	92834

Purpose of Disbursement
Direct Contribution

Candidate Name

Rep. Ed Royce

Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State: CA	District: 39

Disbursement For: 2016
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		10		2015

Transaction ID : 9267194

Amount of Each Disbursement this Period

500.00

Direct Contribution

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1500.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 30 OF 31

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

BURGER KING Franchisee PAC

Full Name (Last, First, Middle Initial)

A. Mike Bishop For Congress

Mailing Address PO Box 1148

City Brighton	State MI	Zip Code 48116
------------------	-------------	-------------------

Purpose of Disbursement
Void - Mike Bishop For Congress

Candidate Name

Rep. Michael BishopOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 08

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		29		2015

Transaction ID : 9308112

Amount of Each Disbursement this Period

-1000.00

Void - Mike Bishop For Congress

Full Name (Last, First, Middle Initial)

B. Mike Bishop For Congress

Mailing Address PO Box 1148

City Brighton	State MI	Zip Code 48116
------------------	-------------	-------------------

Purpose of Disbursement
Direct Contribution

Candidate Name

Rep. Michael BishopOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 08

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2015

Transaction ID : 9308113

Amount of Each Disbursement this Period

1000.00

Direct Contribution

Full Name (Last, First, Middle Initial)

C. Richard Burr Committee

Mailing Address P.O. Box 5928

City Winston-salem	State NC	Zip Code 27113
-----------------------	-------------	-------------------

Purpose of Disbursement
Direct Contribution

Candidate Name

Richard BurrOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

State: NC District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2015

Transaction ID : 9308114

Amount of Each Disbursement this Period

2000.00

Direct Contribution

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

2000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 31 OF 31

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

BURGER KING Franchisee PAC

Full Name (Last, First, Middle Initial)

A. Friends Of Jason Chaffetz

Mailing Address 315 Westfield Circle

City Alpine	State UT	Zip Code 84004
----------------	-------------	-------------------

Purpose of Disbursement
Void - Friends Of Jason Chaffetz

Candidate Name

Rep. Jason Chaffetz

Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State: UT	District: 03

Disbursement For: 2016
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

011

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		29		2015

Transaction ID : 9318517

Amount of Each Disbursement this Period

-2000.00

Void - Friends Of Jason Chaffetz

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Disbursement this Period

--

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Disbursement this Period

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SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

-2000.00

10500.00